

Verification Information

Please note that all verifications of Graduate Medical Education, and verifications of past or present House Staff affiliations done here at the Hospital of the University of Pennsylvania or at Presbyterian Medical Center may be processed by the Graduate Medical Education Office.

The Graduate Medical Education Office is only able to verify dates of Residency/Fellowship training. Please indicate the department name, dates that need to be verified and exact location in which the individual physician serves or served. For specific inquiries regarding clinical or technical skills, character, professional conduct or educational background, please direct your inquiries to the appropriate department. (LINK TO: <http://www.uphs.upenn.edu/gme/gme-programs.shtml>)

Please note that the Graduate Medical Education Office is unable to verify Medical Education, teaching and faculty appointments, malpractice history or proof of malpractice coverage. Requests for this information should be directed as follows:

Medical Degree at the School of Medicine

Send Request to:

Office of the Registrar
University of Pennsylvania School of Medicine
100 Stemmer Hall, 36th and Hamilton Walk
Philadelphia, PA 19104

Teaching and Faculty Appointments

Send Request to:

University of Pennsylvania School of Medicine
Office of Information Management/Records
3401 Walnut Street, Room 527A/Box 6228
Philadelphia, PA 19104

Dental Degree and/or Faculty Appointment

Send Request to:

University of Pennsylvania
School of Dental Medicine
4001 Spruce Street
Philadelphia, PA 19104

To Verify Graduate Hospital

Send Request to:

Federation Credentials Verification Service
(FCVS) At (817) 868-5001, toll free (888)
275-3287 or fcvs@fsmb.org.

To Verify Malpractice Coverage

Send Request to:

University of Pennsylvania Health System
C/O Betsy Berwick
Clinical Practices Administration
3508 Market Street
Philadelphia, PA 19104

Requests to verify completion of training at Philadelphia General Hospital should be directed to the City of Philadelphia, City Hall Archives, 3101 Market Street, Philadelphia, PA 19104.

When requesting verification for the completion of a training program, medical staff affiliation, medical education, malpractice history or coverage, teaching and faculty appointments, a self-addressed, stamped envelope and consent to release information must be included in order to receive a timely response to your requests. All inquiries should include the physicians name, specialty, and dates of training and medical staff affiliation.

Your cooperation will help generate a more expedient reply to your inquiries.

Thank you,

Renee Rosati
Graduate Medical Education
215-662-3957